

Member Billing Contact:

Eric Paull
Sandpoint Urban Renewal Agency
509 N 5th Ave Ste E
Sandpoint, ID 83864

Invoice Date: 9/1/2018
Invoice Number: 18040 - 1819 - 1
Policy Period: 10-1-18 to 9-30-19
Policy Number: 38A18040100118

Insurance Billing

DESCRIPTION
10/1/2018 - 9/30/2019 Policy Year Annual Premium: \$1,349.00
Minimum Due 10/1/2018: \$674.50
Balance Due 4/1/2019: \$674.50
For proper application, please do not combine other payments with your premium remittance.

Please Detach and Submit with Payment

Member:

Sandpoint Urban Renewal Agency
509 N 5th Ave Ste E
Sandpoint, ID 83864

Make Checks Payable to:

ICRMP
PO Box 15116
Boise, ID 83715

Invoice Date:	9/1/2018
Invoice Number:	18040 - 1819 - 1
Due Date:	10/1/2018
Minimum Due:	\$674.50
Amount Paid:	

Write Amount Paid Here

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Address Corrections? Please make changes on the back of this form and enclose with your payment.